

ISSUE SLIP STAPLE AREA (for additional cross-references)

POSITION	INITIALS	ID NO.	DATE
	AS		01/21/00
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		16	2-8-00
FORMALITY REVIEW	CH	71632	2/14/00
RESPONSE FORMALITY REVIEW	CH	71632	3/8/00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	4/2
2	✓	✓	4-2-00
3	✓	✓	5-18-00
4	✓	✓	11
5	✓	✓	11
6	✓	✓	11
7	✓	✓	11
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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